







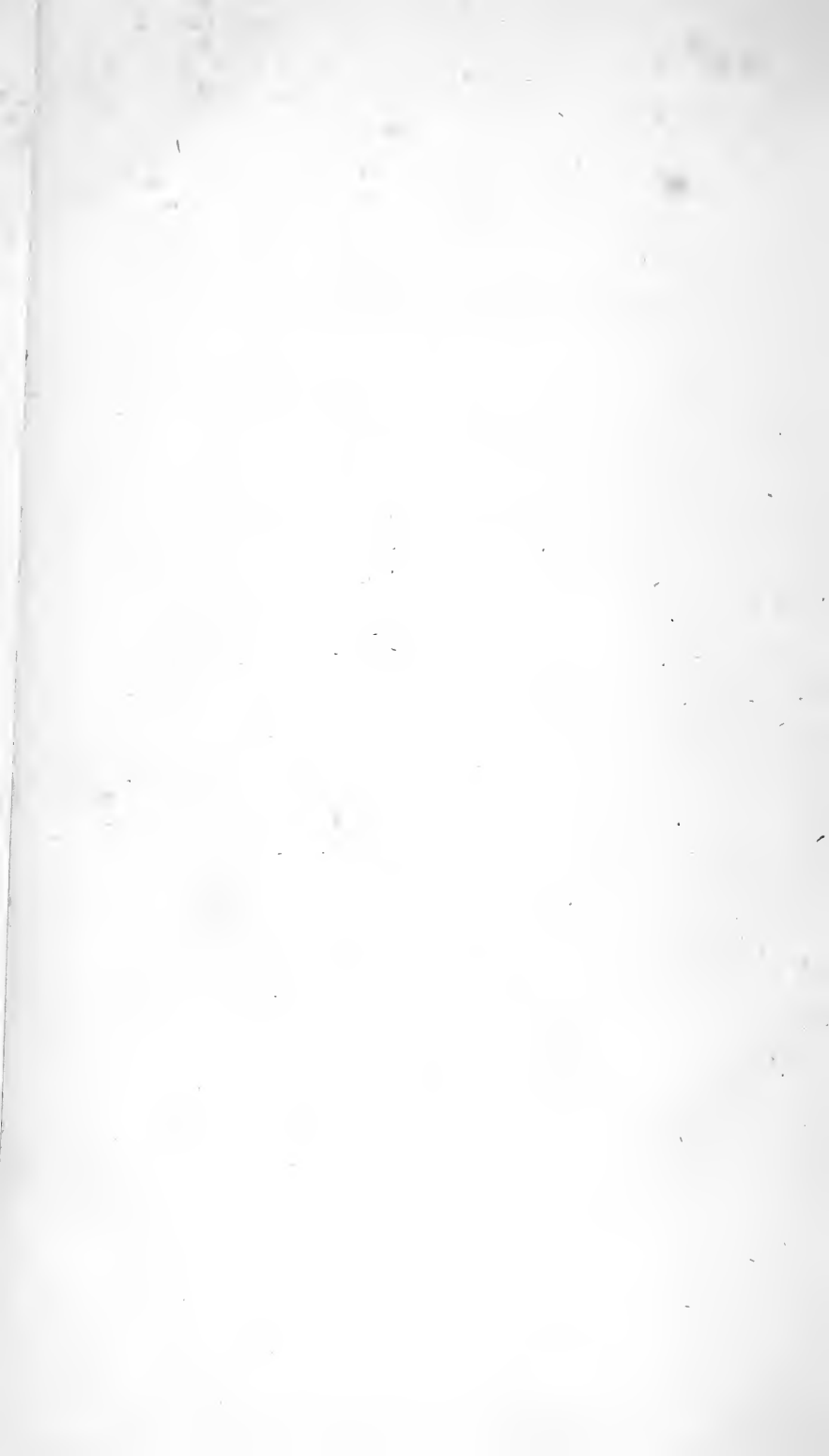








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PRACTICAL OBSERVATIONS

ON

LEUCORRHŒA,

FLUOR ALBUS, OR "WEAKNESS:"

WITH

CASES

ILLUSTRATIVE OF A NEW MODE OF TREATMENT.

BY

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PREFACE.

HAVING been engaged nearly six years as a Teacher of Midwifery in London, a great portion of my time has necessarily been devoted to the consideration of the various diseases connected with that branch of medical science.

Two circumstances have induced me to direct my attention to the disease, denominated *Leucorrhœa*, or “Whites:” one, a belief that its pathology has not been well understood; the other, my having witnessed the extreme obstinacy of most cases, under the treatment usually adopted. In the perusal of the following pages, it will be seen, that I have taken a somewhat novel pathological view of vaginal discharges, and that, in the treatment, I have

deviated materially from what has been the routine practice of the day.

Extensive structural changes, or the displacement of parts, I have not taken into consideration in the present work, having confined my observations to diseases, usually denominated functional, or those which occur independently of disorganized structure. A line of demarkation, however, can scarcely be admitted, for if inflammation be a disorganizing process, structural disease may be said already to exist. It is true, that an irritable state of certain organs, or tissues, may frequently give rise to the complaint in question. Fortunate it is, that we now possess a remedy, which, if judiciously employed, will generally effect a cure in most of these affections, even under circumstances extremely unfavourable.

Whether the mode of practice, I have slowly and cautiously adopted, and which is a novel one, at least, in this country, namely, the local application of the nitrate of silver, will prove so successful in other hands as it has in mine, time and experience alone can determine.

From the charge of prolixity, I trust to be exonerated, having endeavoured to condense my “observations,” and to give them a character essentially practical; indeed, I have no other object in the publication of this work, than that the few practical remarks it contains, may be found useful to my fellow-labourers, in the cure of those obstinate diseases, which too frequently lead to irreparable injury of the female constitution, or to permanent and fatal organic changes.

Sackville Street,

August 21st, 1830.

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PRACTICAL OBSERVATIONS,

&c. &c.

CHAP. I.

PATHOLOGY OF LEUCORRŒA.

IT is a fact, which cannot be denied, that there are no diseases to which the female system is liable, so likely to be disregarded, in their incipient or early stages, as those of the womb, and its contiguous parts. The various morbid changes, functional and structural, which assail these important organs of the body, are oftentimes so insidious in their approach, so anomalous in their character, at least to a superficial observer, and so invariably affecting other and more distant parts, by what is termed sympathy or nervous communication, that many of the most serious uterine complaints have often advanced to a state not to be controlled by medical treatment, before their

true character has been fully ascertained. So intractable do they sometimes prove, as to induce, by their long continuance, the severest dyspeptic symptoms, hysterical affections, feverish paroxysms, excessive languor and emaciation; or by operating upon the brain, directly or through the medium of the digestive organs, occasion other sympathetic affections, still more important in their nature and result.

It must be familiar to the practitioner, that every discharge, not sanguineous, which issues from the vagina, is, among females, usually included in the terms *Leucorrhœa*, or “Whites.” There is also a popular opinion, that vaginal discharges have their origin in constitutional or local debility; hence a complaint of this kind is denominated a “Weakness.” That such a term should be employed to perpetuate an error in practice, is to be lamented; for, I believe, if we investigate the pathology of leucorrhœal discharges, we shall find them, most commonly, to have their origin in local excitement.

Dr. CLARKE, in his very practical work on *Female Diseases*, when speaking of the trans-

parent mucous discharges not accompanied by any alteration of structure, classes such affections under two heads, namely, those which originate from, or are accompanied by increased action in the vessels of the part, and others which arise from debility ; and Mr. BURNS has said, that leucorrhœa may be caused by a state of increased vascular action, and by debility, either preceded by increased action, or directly produced by weakening causes ; whilst many authors have asserted, that the disease is always a “ weakness,” general or local, according to the true meaning of the term. A minute pathological inquiry must, I think, lead to the conclusion, that local irritation, determination, or inflammation, is the immediate exciting cause.

Whilst some writers have insisted on leucorrhœa being always a local disease, having its seat, for the most part, in the uterus or vagina ; others have maintained it to be symptomatic, having its origin in general functional disturbance of the system. To this not by any means unimportant part of the subject, I have directed my attention, in order to discover

which opinion was entitled to credit; and I have been led to the belief, that the vaginal discharge is commonly the result of some direct local stimulus. That cases do occur, which seem to depend upon a disordered state of the digestive organs, or disturbance of the general health, is obvious; but this altered or relaxed state of fibre, is one which particularly predisposes to local inflammation, or congestion. BATTIN, however, who has written upon this subject, makes his eighth species of the disease, “leucorrhœa from indigestion;” whilst PINEL commences his classification with the “constitutional” variety. It is not unusual for a female to have excessive leucorrhœal discharge accompanied by great disturbance of the system. Vertigo, a preternatural heat of the surface, a coated tongue, thirst, and a full pulse, are the symptoms which often accompany, and sometimes precede, the vaginal discharge; when, after a few days of active purgation, and a strictly vegetable diet, all the symptoms, together with the discharge, entirely disappear. Here it must be evident that the uterine vessels partake of the general plethoric state, or disturbance of the system.

A division has been made of vaginal discharges, by Dr. DEWEES, a highly respectable writer and practitioner, which, he thinks, can be defended by both reason and practical observation. Under the first head, or the “leucorrhœa of direct irritation,” he considers all instances of the discharge which follow active inflammation of the mucous membrane of the uterus or vagina, produced by some local cause, as laborious parturition, the application of instruments, irritating substances applied to the surface of the vagina, extraneous bodies introduced into it, tumours within the vagina, &c. Under the second head, or the “leucorrhœa of remote or indirect irritation,” he would range all those instances in which the vagina sympathizes with some other portions of the body,—as with the uterus during pregnancy, or with it in long obstructed menses; with it, when the menstrual action is about to furnish the catamenial discharge, or after that action has just ceased. With the rectum, when subject to hemorrhoides, or when irritated by ascarides, &c. Under the third head, or the “leucorrhœa of habit,” he would enumerate those instances

of the discharge, which continue after the active or inflammatory condition of the parts has ceased, as after syphilis, or gonorrhœa, has been cured, a prolapsed uterus restored, &c.

It is evident, that the author here alluded to, considers the disease to have almost invariably a local origin.

Every protracted or severe case of leucorrhœa, will be attended by great functional disturbance, an interrupted digestion,* a pallid and leucophlegmatic countenance, scanty and irregular menstrual evacuations, a morbid sensibility of the nervous system, oppressed respiration, and exhaustion of the vital powers. It will produce, in short, a variety of anomalous complaints; not unfrequently a remarkable coldness of the feet and legs, and prolapsus, or falling down of the womb, and sometimes prevents conception from taking place. Such are the common effects of profuse vaginal discharges; and hence will appear the difficulty, in the more advanced period of the disease, of distinguishing between cause and effect. The

* " Le derangement des digestions accompagne constamment leucorrhée constitutionnelle."—GARDIEN.

various dyspeptic and other symptoms, which sometimes prove so distressing to the patient, I conceive are, for the most part, secondary or sympathetic, and consequently if we succeed in removing the local disease, these will gradually disappear. It would, however, be injudicious to direct the attention wholly to the one, to the neglect of the other. It has been well observed by an able writer,* that an idiopathic and organic affection of some part may coexist with disorder of the general health, and that which was a mere functional complication in the beginning, may become organic disease in the sequel.

Much diversity of opinion has existed among writers who have inquired into the pathology of leucorrhœa, as to the precise structure which becomes primarily affected, or which may be considered as the seat of the disease. Dr. CULLEN,† although he admitted that leucorrhœal discharges proceeded from various sources, confined his observations to that species of the disease, in which he imagined the

* Dr. MARSHALL HALL.

† Vol. iii. page 24.

discharge issued from the same vessels which, in their natural state, poured out the menstrual secretion. Dr. LEAKE* has also stated, that the discharge proceeds from the vessels subservient to menstruation. Some females have a transparent vaginal discharge about the middle of the interval between the menstrual periods, and which, from its being usually accompanied by a pain in the back and loins, and other feelings which attend menstruation, proves, as Dr. HAMILTON has supposed, the connexion between the two; particularly as the white discharge at the middle of the period is often tinged with blood, if the patient make any violent exertion. From such opinions, which prevailed even among the earlier writers, the terms which have been employed by SYLVIVS and others, have arisen, viz. “*menses albi*,” “*menstrua alba*,” &c. ASTRUC believed that the inside membrane of the womb was thick set with small glands, which he denominated *colatura lactea*, and from which he imagined the secretion termed *fluor albus* usually arose.

* Vol. i. page 100.

I believe the discharge seldom issues from the uterine cavity. That the uterus is lined with a mucous membrane, BICHAT and others have most satisfactorily proved, (although some writers have thrown doubts on the subject) and like other mucous membranes, when in a state of morbid action, it may occasionally throw out a superabundant quantity of mucus, or even pus. By attending to the following circumstances, we shall, in some cases, be able to ascertain whether the discharge issues from the uterine cavity, or not. When the seat of the disease is in the vagina, or cervix of the uterus, the discharge commonly appears during the night, notwithstanding the patient is confined to the horizontal position, but if in the cavity of the womb, it is generally suspended: a piece of sponge, therefore, being introduced into the vagina at bed time, will occasionally determine the question; for if the discharge issues from the surface of the vagina, it will become saturated with it. This test, it must be admitted, is not implicitly to be relied on; although, by being often repeated, it may throw considerable light upon the pathology

of the disease. The discharge issuing from the cavity of the womb, so completely deranges the functions of this organ, that in almost all cases it renders the female incapable of conception. A purulent discharge, the result of active inflammation in the mucous lining of the uterus, unconnected with parturition, is not common in its occurrence.

Some writers, who seem to have devoted a good deal of attention to female diseases, state that most leucorrhœal discharges arise from the mucous surface of the vagina. Dr. DEWEES has declared his belief that it consists in an altered action of the vaginal lacunæ, or glands, which furnish, in a state of health, the moisture so important to the part; and Mr. BURNS imagines that the most ample and most frequent source is from the vagina.

It must be admitted, that a great pathological difficulty sometimes arises, in deciding upon the tissue or part which has been morbidly excited: but it is fortunate, that in the majority of cases, the local habitation of the disease is of limited extent; and I may add with confidence, that we possess a remedy

which, if judiciously employed, will generally effect a cure, even under most unfavourable circumstances.

There is, probably, no structure in the female system more likely to become irritated or inflamed, than the mucous lining of the vagina. This must be obvious, when its great vascularity and peculiar sensibility are considered; and hence will appear the reason, why females are so liable, even when in health, to have at times a superabundant vaginal secretion, which from its being unattended by pain, or constitutional disturbance, excites, in mild cases, but little anxiety.

CHAP. II.

PATHOLOGY OF LEUCORRHŒA CONTINUED.—IRRITATION, CONGESTION, AND INFLAMMATION.—DISEASE IN THE OVARIA, OR FALLOPIAN TUBES.—EXCORIATIONS ABOUT THE NYMPHÆ.—VASCULAR TUMOUR NEAR THE MEATUS URINARIUS.

IN investigating the pathology of leucorrhœa, there are three states or conditions to be regarded, as being almost invariably the immediate causes, at least in my own opinion, of the disease in question; namely, irritation, congestion, and inflammation of the sub-acute or chronic kind.

Probably there are no diseases which have obtained, and deservedly so, among some unprejudiced practitioners, within the last few years, greater consideration, than those which belong to the female genital organs. It is, however, only recently, that a correct discrimination has been made between those affections which may be said to be unequivocally inflam-

matory, and others which give rise to certain painful states, but which exist independently of inflammation. That peculiarly excited condition of the various organs or tissues, commonly designated irritation, has long been acknowledged as forming an important disease in the catalogue of morbid function. NAUCHE in France, and GOOCH in this country, have now, in a satisfactory manner, separated this condition of the uterine system from actual inflammation; although it is fair to observe, that the fact had been well understood by preceding writers and practitioners, but they had not given to it a nosological distinction. "The disease," says Dr. GOOCH, "which I have ventured to call the irritable uterus, is a painful state of that organ, neither attended by, *nor tending to produce, a change in its structure.*" This is a bold assertion. Irritation would appear to be a certain action produced in a part by the application of a stimulus. Now, as that action cannot always be one of a healthy kind, is it not fair to presume, that such disturbance, if prolonged, may eventually produce a decisive morbid change, engender-

ing, in fact, a disease more important in its character, if not fatal to the structure of the part?

Irritation, when the cause of leucorrhœal discharge, is usually a local disease, being for the most part confined to that part or structure of the genital organs, in which it had become developed, but producing occasionally a train of symptoms, in a great degree peculiar to the tissue or organ which happens to be the immediate seat of the disease.

Irritation in mucous membranes, produces an augmentation of their natural secretions. When attacking the salivary glands, an additional flow of saliva takes place. If the kidneys are the seat of the disease, there will be an increased secretion of urine. An irritable state of the uterus, will produce menorrhagia, or excessive menstrual secretion, whilst the same condition of the mucous lining of the vagina, or neck of the uterus, will occasion copious leucorrhœal discharges.

The talented author alluded to, states the symptoms of the irritable uterus to be, "pain in the lower part of the abdomen, along the brim

of the pelvis, and often also in the loins. The pain is worse when the patient is up and taking exercise, and less when she is at rest in the horizontal posture; in this respect it resembles that of prolapsus uteri, but there is this difference, that in the latter, if the patient lies down, she soon becomes quite easy, but in the complaint of which I am speaking, the recumbent posture, although it diminishes, does not remove the pain. It is always present in some degree, and severe paroxysms often occur, although the patient has been recumbent for a long time. If the uterus be examined, it is found to be exquisitely tender, the finger can be introduced into the vagina, and pressed against its sides without causing uneasiness, but as soon as it reaches and is pressed against the uterus, it gives exquisite pain. This tenderness, however, varies at different times, according to the degree of pain which has been latterly experienced. The neck and body of the uterus feel slightly swollen, but this condition also exists in different degrees, sometimes sufficiently manifest, sometimes scarcely or not at all perceptible. Excepting, however, this tenderness,

and occasionally this swelling, or rather tension, the uterus feels perfectly natural in structure; there is no evidence of schirrus in the neck, the orifice is not mis-shapen, its edges are not indurated. The patient, finding her pain greatly increased by rising and walking, soon learns to relieve herself by lying on the sofa, and at length spends nearly her whole time there. Notwithstanding this precaution, there is always a considerable degree of uneasiness, but this frequently increases to severe pain. These paroxysms generally come on either a few days before menstruation, or (as is the case in many instances) a few days afterwards. If the paroxysm is properly treated, it subsides in a few days to the ordinary and more moderate uneasiness. Whilst this uneasiness is felt in the substance of the uterus, the general circulation is but little disturbed. The pulse is soft, and not much quicker than is natural; but it is easily quickened by the slightest emotion. In a few instances, however, there has been a greater and more permanent excitement of the general circulation; the degree in which the health has been reduced, has been different in

different cases. A patient who was originally delicate, who has suffered long, and has used much depleting treatment, has been (as might reasonably be expected) the most reduced; she has grown thin, pale, weak, and nervous; menstruation often continues regular, but sometimes diminishes, or ceases altogether; the functions of the stomach and bowels are not more interrupted than might be expected from the loss of air and exercise; the appetite is not good, and the bowels require aperients; yet nothing more surely occasions a paroxysm of pain than an active purgative. Such are the leading symptoms of this distressing complaint."

A great pathological distinction may here be recognised, if my observation be correct. First in reference to the pain experienced by the patient, when pressure is applied over the pelvic region, and the absence of leucorrhœa, as indicative of the body of the uterus being the seat of the disease; and secondly, the presence of a copious vaginal discharge, at first thin and transparent, then becoming thick and opaque, as indicative, either that the morbid

action is limited, or has extended, to the cervix uteri.

The sequelæ of this irritable state of the uterus, and its contiguous parts, are, great depression of spirits, languor, palpitation of the heart, hysterical and other nervous sensations, in all their Protean shapes.

It is too palpable to require comment, that an error in diagnosis too frequently leads to an error in practice, which sometimes either contributes to promote the extension of disease, or tends to the destruction of life; hence great credit is due to Dr. ADDISON, who, in a recent work on the disorders of females arising from uterine irritation, has impressed so strongly on the minds of the junior members of the profession, (to whom his observations are directed,) the necessity of discriminating between causes and effects, and of not having their attention diverted from the *consequences* of local irritation upon the general constitution. It is scarcely possible that an important organ, like the uterus, should become the seat even of functional disorder, without its being sensibly felt in other and distant viscera; but at the same

time, it would be a task of no ordinary difficulty, to trace its sympathetic course to each particular organ, or to calculate in which the functional disturbance would be the greatest, so much depends upon its immediate susceptibility. The morbid sensibility, in truth, may be excited in one part to-day, and in another to-morrow, when like an *ignis fatuus*, it will be sure to mislead the practitioner, if he does not strike at the very foundation at once.

CASE I.—S. J., ætat 49, residing in Bridle Lane, admitted a patient under my care at the St. George's and St. James's Dispensary, on the 10th of June. She is the mother of fourteen children, exclusive of two abortions, and has, during the last twelve months, been subject to profuse catamenia, and excessive leucorrhœal discharge of a yellowish colour. She has pain in the loins, shooting in paroxysms through the region of the uterus, in which there is also a sense of fulness, and throbbing. She complains of great languor, with loss of appetite, and uneasiness at the pit of the stomach. She is frequently attacked with the globus

hystericus, and disturbance about the head, and says that a flow of tears affords her much relief. Pulse 85. Bowels confined.

Ten ounces of blood to be abstracted from over the sacrum by cupping.

R. Magnes. Sulph. ʒvi.

Infus. Rosæ, ʒviiss.

Acid. Sulph. dil. ʒi.—M. ft. Mist. cujus
sumantur Cochlearia duo vel tria ampla, mane, quotidie.

R. Argent. Nitrat grs. xii.

Aq. distill. ʒvi.—M. ft. Injectio.

14th. During a period of twenty-four hours after the cupping, she felt extremely faint and sick, and now complains of increased languor. Says she has used the injection regularly, notwithstanding the presence of the catamenia, and that it occasioned no degree of pain, except a little smarting, the parts having been for some time in an irritable state.

To omit the aperient medicine.

The strength of the injection to be increased from grs. ij. to grs. iv. to the ounce of water; and to take a pill, containing five grains of the extract of hyoscyamus and half a grain of opium, at bed time.

18th. The sanguineous discharge has ceased having continued only a week, its usual period being from ten days to a fortnight. The leucorrhœal fluid has become "white and thinner than it has been for several months." The local pains are greatly relieved, but she still complains of occasional heat and throbbing about the womb.

To continue the injection.

22nd. The leucorrhœa has ceased, and the local heat and pains have almost left her. There is still great languor, and loss of appetite.

R. Infus. Rosæ, ℥viiss.
Sulph. Quinin. ʒi.
Tinct. Card. Comp. ℥ss.—M. ft. Mist. cujus
sumantur Cochlearia duo ampla ter die.

To continue the injection.

26th. The vaginal discharge has not re-appeared. Her spirits are better, and the appetite improves.

Continuentur remedia.

30th. There is no leucorrhœa. Her general health continues to improve, and she intends to go into the country in the course of a few days. Discharged cured.

Local congestion in the vaginal and uterine vessels, may exist independently of, or in common with, general fulness of the system. We have familiar illustrations of the former, in the appearance of a sanguineous discharge from the vagina during the early months of pregnancy, or the period of lactation. The symptoms which arise from a congestive state of the uterine system, although somewhat analogous to those which become developed from irritation or inflammation of the chronic or sub-acute kind, will be found, upon close observation, to vary, so as to render the diagnosis not altogether difficult: at least in many cases. Uterine pain is common to most affections such as are now treated of, sometimes coming on in paroxysms, and shooting into the vagina, or down into the thighs; but in this it is inconsiderable, and the state is principally to be recognised by a beating or throbbing sensation in the pudendum, and in the lower part of the abdomen. The bladder is sometimes irritable, and the urine for the most part is high coloured, and is voided in small quantities. A slight itching, and a white mucous vaginal discharge, are the

invariable concomitants of local congestion, or activity in the vessels of the uterine system. Unless the complaint is protracted, or there is a general fulness of the whole vascular system, there will be no constitutional excitement, the pulse remaining undisturbed. If the vessels are not relieved by blood-letting, or other measures, uterine hemorrhage not unfrequently ensues, and affords a temporary relief, although it does not always effect a cure.

Leucorrhœal discharge oftentimes appears immediately before and after the menstrual period, and at no other time. This may be accounted for on the principle of congestion, namely, that during the existence of this uterine function, there is an unusual fulness in the vessels, in consequence of which, a stimulus is applied to the capillaries of the secreting parts, and hence a morbid action, and the appearance of leucorrhœal discharge.

A congestive state of the utero-vaginal vessels may take place, as a consequence of the various causes which produce other morbid changes in the same parts; but, probably, the most common are, first, irregularities in diet, it

being taken in too large quantities, or being too nutritious in its properties; and secondly, inactive or indolent habits of life.

It may be remarked, that these separate conditions are, by most writers, fully recognised as being pathologically correct; but by others, they are considered as different degrees only of morbid sensibility, or links of the same chain. It is, however, satisfactory to know, that the remedy spoken of in the pages of this work, almost always allays the morbid sensibility, and even in unequivocal instances of irritation or congestion, it is not only admissible, but may be employed with every prospect of perfect success.

From a strict pathological investigation into the numerous cases of leucorrhœa, which have fallen under my observation, I have been induced to believe, that when the morbid secretion is abundant, and the local symptoms severe, one uterine affection gives rise to the disease more frequently than any other, namely, a sub-acute or chronic inflammation of the cervix uteri. Even when the vaginal surface appears to have been the tissue primarily af-

fects, we shall find, in almost all protracted cases, the cervix uteri also seriously involved in the mischief. Mr. BURNS, an authority which cannot be quoted without respect, alludes to this part of the subject by observing, “ that when the discharge is very opaque, and attended by considerable pain in the back and loins, there is reason to think that the cervix uteri is in a state of irritation; and by examination may be found tender to the touch, and the mouth soft and enlarged a little. This state does not constitute disease of structure, though it may lead to it, but it consists merely in an affection of the glands. After the tender state is nearly subdued, and the discharge has become more chronic, the cold bath, tonics, and astringent injections are proper.” Here it is evidently meant that, as long as the tender state of the cervix uteri continues, we ought not to employ those means which are usually had recourse to, with a view of giving tone and vigour to the system, which, in fact, is an admission of the inflammatory character of the disease. I have scarcely ever seen an instance of profuse leucorrhœa, without more or less ten-

derness of the cervix uteri. I have also reason to know that very many of such cases are mistaken for carcinoma uteri, and that, in consequence, no remedies are prescribed, or a very inefficient mode of practice is adopted. It may be difficult, it is true, in some cases, to discriminate between a chronic inflammatory affection of the cervix uteri, and incipient schirrous disorganization. The following remarks will, probably, assist the young practitioner in his diagnosis:—This inflammation of the cervix uteri, like schirrus, or any organic disease of the uterine system, attacks occasionally at the period of life when the catamenia are about to cease, but I have more frequently found it to exist in married females, from the age of twenty-six or twenty-seven to that of forty, and I have recently seen several cases occurring in young married females, within three months after the birth of the first child. The local symptoms in both diseases, are very nearly allied. There will be occasional lancinating pains through the region of the uterus, with a constant dull kind of pain about the inferior portion of the sacrum, the hip or groin, attended by an irritable blad-

der, or frequent desire to void the urine, and in some severe instances, by tenesmus, and pain within the vagina when in the sitting posture. The vaginal discharge is commonly of a milky or cream-like colour, now and then having a glutinous consistence; and is often, in the more acute cases, mixed with a dark coloured or grumous secretion. Menstruation, if not interrupted by lactation, may be resumed with its usual regularity, although, after a time, some deviation takes place: generally, in the first instance, by its continuing several days beyond the accustomed period. I have remarked that, although the local pains are not unfrequently increased in severity at the commencement of menstruation, a great relief is afforded as soon as the catamenial secretion becomes more abundant. Upon making an examination per vaginam in this disease, the os uteri will not be found opened to the same extent as in schirrus, (an exception may be made in the case of a woman who has had a numerous family); nor will its margin present the same cartilaginous hardness to the touch. The pain does not appear to be situated in the edges of the os uteri,

as described by some authors, but in the cervix, as pressure upon this part alone, occasions the patient to complain. The uterus will be found projecting lower in the vagina than natural, but this will depend upon the nature of the disease; the more acute, the further it will have descended. It should be recollected, that prolapsus uteri is a very common effect of protracted leucorrhœa, when, in addition to the symptoms already enumerated, there will be fulness about the pudendum, or weight on the perinæum, and a dragging sensation about the loins, with difficulty in voiding the urine, and sometimes extreme pain in coitu, whilst the discharge will be frequently tinged with blood. These symptoms become modified or severe, according to the degree of descent which has taken place, or the excitability which exists in other and distant organs; hence, in a case of simple relaxation, there will oftentimes be merely a sensation of weakness, and fulness about the pubes, with an increased, but mild, mucous discharge from the vagina. I have seen several cases of prolapsus uteri, in their incipient state,

most effectually relieved by the application of the means hereafter named.

But even supposing that no diagnostic marks existed, to guide the judgment of the young practitioner, in distinguishing between chronic inflammation and incipient schirrus of the cervix uteri, two questions will arise, to which no very decisive answers can be given. Is it not possible for inflammation, in its ordinary form, to terminate in carcinoma, or, to say the least of it, in disorganization? If the disease is confirmed schirrus, may it not be arrested in its progress, if not entirely removed? I would reply to the last question, by observing, that I have seen more than one case, where a morbid affection of the cervix uteri had been pronounced by eminent practitioners to be carcinoma, but in which the disease had been afterwards totally eradicated, the uterus again taking on its healthy functions, and the woman bearing children as before.

CASE II.—Mrs. C., ætat 33, called on me, on the 24th of February, 1829, at the request of a medical friend, Mr. REID, of Charlotte

Street, Bloomsbury. She had been delivered three years before of a healthy child, after an easy labour. For the last two years and a half she has been subject to constant and profuse leucorrhœal discharge, with frequent and shooting pains through the region of the uterus, and about the right groin, with occasional dysuria and tenesmus. The general health is greatly disturbed; bowels irregular, with loss of appetite. Upon making an examination per vaginam, pressure of the finger upon the cervix uteri occasioned considerable pain, which, in subsequent examinations, often continued several minutes after the finger had been withdrawn. The os uteri was considerably more open than natural, but its margin was not indurated. She had been under the care of several respectable practitioners, and the impression on her mind was that she was labouring under cancer of the womb.

In the first instance, the usual mode of treatment was adopted: blood was abstracted by means of cupping from over the inferior portion of the sacrum, to the amount of eight ounces, and repeated three times, with an interval

between each of about three weeks. She had taken aperients frequently, and injections of various kinds had been used with little or no benefit.

July 2d. The nitrate of silver was conveyed by means of a tube, and applied to the cervix uteri for the space of a minute, which occasioned no degree of pain, except what might have been produced by the introduction of the finger.

6th. The nitrate of silver again applied as before.

9th. The discharge has diminished, but the pains not having abated, eight leeches were ordered to be applied to the right groin.

12th. The nitrate of silver again applied.

18th. The discharge is lessened considerably; and the patient now expresses a belief that she shall soon be restored to health, having previously imagined her case to be hopeless. The nitrate of silver again applied.

27th. The pain is relieved; her general health is improved, and she sleeps well at night. The nitrate of silver applied in the usual manner. It is necessary to observe, that she has taken the hyoscyamus at night, (one drachm of the

tincture,) and the bowels have been regulated by aperients. The following tonic has been prescribed :

R. Infus. Rosæ, ℥viiss.
Sulph. Quininæ, ʒss.
Elix. Vitriol. ʒi.—M. fiat. Mist. sumantur
Cochlearia duo ampla ter die.

August 8th. The discharge is scarcely perceivable. The nitrate of silver applied as before.

25th. The patient is perfectly well, having neither vaginal discharge nor local pains.

To practitioners unaccustomed to examining into the state of the os and cervix uteri, it may not be irrelevant to observe, that the form of the os uteri occasionally varies. In some females, instead of its being a small transverse opening, it will be found of a circular form, and now and then so small as scarcely to admit the point of a probe, whilst in others, who have had many children, the point of the finger can be easily introduced ; and instead of being uniform, and smooth or flat, it not unfrequently

becomes projecting, having an anterior and posterior lip.

To consider scirrhus an incurable disease, or that it so exists throughout the system, as to become developed in one part when eradicated from another, appears to be a doctrine as dangerous as it is unscientific, inasmuch as it at once puts a stop to all pathological inquiry, and leads to the adoption of inefficient or palliative measures only in the treatment. Dr. DENMAN, when speaking of cancer in the uterus and breasts, says, when the former is the seat of the disease, the first symptom is usually inflammation, and if this can be effectually removed, by strict abstinence, by bleeding occasionally, by antiphlogistic medicines, and by constant repose in the horizontal position, he has often persuaded himself that the disease has been prevented, or removed; and Dr. CLARKE has observed that, by a strict attention to management, and an unwearied perseverance in the means suggested, all cases of the complaint may be relieved; in many, the farther enlargement of the tumour, or progress of the thickening, may be prevented; and if he were not afraid

of deceiving himself, or of deceiving others, he would venture to express a belief that, in a few instances, the disease has altogether subsided. Now, although other judicious and active measures may exert a control over such affections, whether they happen to be genuine cases of incipient scirrhus, inflammation in its chronic form, irritation, or simple enlargement from congestion, there is no remedy which can be employed, with a greater prospect of success, than that already alluded to, namely, the nitrate of silver, applied immediately to the part affected.

It is scarcely necessary I should advert to the fact, now so well known, that the removal of a portion of the cervix uteri, in which, from its glandular construction, carcinoma usually commences, is not by any means incompatible with life. M. LISFRANC, upwards of a twelve-month since, reported to the Académie Royale de Médecine, forty cases, in which the operation had been performed, three of which only terminated fatally. In two of these, a scirrhus alteration of other organs was found; and in the third, the patient died from a relapse, three

months after the operation.* Besides dragging down this portion of the uterus to the os externum, a necessary preliminary step,† and the pain inflicted by cutting through the cervix with the knife, the operation gives a shock to the system, sufficient in itself to destroy the patient. Fortunate will it be to the female, if the nitrate of silver should altogether supersede the use of the knife, which I feel confident, if early and judiciously employed, in many cases, it eventually will.

Inflammation of the mucous surface of the vagina, an important cause of leucorrhœa, like that which attacks other structures, may be of the acute or chronic kind: the latter being the most common, and the most insidious in its approach. Often the first symptom indicative of inflammation of the lowest grade, is an increased secretion of thin mucus, unaccompanied by any degree of pain, or irritation.

* *Archiv. Gener. de Méd.*

† Since the above was written, M. COLOMBAT has presented to the Royal Institute of France, an instrument for the excision of the cervix uteri, when, from the rigidity of the parts, that viscus cannot be drawn down to the os externum. It is termed "Hysterotome."

This is the state which MORGAGNI compares to that inflammatory affection of the mucous membrane of the lining of the nostrils, termed coryza. The progress, however, of the disease is marked by a sense of burning and itching, with, sometimes, a degree of swelling about the labia.* As the complaint advances, the vaginal secretion changes its consistence and appearance, becoming thicker, and staining the linen of a yellow colour, or assuming a brownish hue, when it is usually offensive. In this inflammatory complaint, which, it must be recollected, is not of a specific kind, the glands of the groin seldom become enlarged, neither will there be much pain in voiding the urine, unless the discharge is extremely acrid, the vaginal surface highly sensible, from the intensity of the inflammation, or there happen to be excoriations, or an efflorescence spreading inwards. These symptoms continue for a long or short period, depending often upon the vigour of the means which may have been employed to subdue them. After their subsidence, the patient

* Swelling or abscess of the labia alone, must be considered as a distinct disease, being confined to the external parts.

complains of great languor and debility; she looks pale, and there will be a want of animation in her countenance, with a dark semi-circular appearance under the eyes. The digestive functions will be greatly disturbed, and there will often be experienced, pain, a great degree of uneasiness, and distention in the stomach. It is in this state that the female usually seeks the aid of the practitioner.

Inflammation of the mucous surface of the vagina may arise from any of those causes which produce the same action in other textures, and which may be classed under two heads:—general, and local excitement. The circumstances which induce the former state, may be considered as follows; namely, a highly nutritious diet, and the free use of wines, spirituous or fermented liquors; violent exertions of the body, such as dancing; pyrexia, or fever, and exposure to cold. In short, such complaints may arise from any unnatural activity in the vascular or nervous systems. Among the various local causes, may be noticed, difficult parturition, blows, the lodgement of extraneous bodies, as a pessary or piece of sponge, too

frequent coition, &c.; whilst misplacements of the uterus, or its various diseases, such as scirrhus, hydatids, polypus, &c. will commonly produce irritation and inflammation, with a discharge of unhealthy mucus from the vagina. Local excitement, either in the vagina, or neck of the womb, or both, is often produced by hemorrhage, or abortions. Painful menstruation, in which there is commonly congestion of the uterine vessels, will occasionally be preceded and followed by an increased secretion from the mucous membrane of the vagina.

A vaginal discharge, the result of a morbid action in the fallopian tubes or ovaria themselves, sometimes occurs, in which case it might be exceedingly difficult to decide, with any degree of pathological accuracy, upon the true nature of the disease. The more prominent symptoms would be, deep-seated abdominal pains, with an enlargement, or great tenderness on pressure, either on one side or the other. A case is recorded, as happening in the person of one of the Sisters of Charity at Tours, where the morbid vaginal secretion issued from the right ovary. This female had

been subject to severe leucorrhœal discharges for many years, which, in fact, ultimately destroyed her. Upon examination of the body after death, the ovarium was found exceedingly enlarged, being almost full of pus. It was grasped by the fimbriated extremity of the fallopian tube, and through this canal the matter passed from the ovarium into the uterine cavity, and from thence externally through the vagina.

Here it may be necessary to state, that M. BLATTIN examined the bodies of twenty-four females, who died from excessive leucorrhœal discharge, with a view of ascertaining the seat of the disease. In nine of these cases, the morbid secretion was found to arise from the uterus; in *thirteen*, from the neck of the uterus and vagina; and in two, from the fallopian tubes.

A mucous vaginal discharge, is not unfrequently discovered to arise from excoriations about the nymphæ: a species of the disease which is purely local. In such cases, I conceive the nitrate of silver to be the most efficient remedy which can be employed.

CASE III.—Mrs. H. a respectable married woman, 27 years of age, applied to me, having a morbid vaginal discharge, attended by considerable irritation, and pruritus in the pudendum; symptoms which I found were occasioned by excoriations about the nymphæ, and the presence of a small, but highly vascular tumour, situated close to the meatus urinarius. This tumour answered, in every respect, the description so accurately given by Dr. CLARKE; it being of a florid red colour, and very sensible, differing only in its having a smooth, instead of a granulated surface. It did not appear to extend into the meatus, although the patient suffered much in voiding her urine. It was about the size of a small bean. After some persuasion, she consented to have it removed, which was easily accomplished with the scissors. A weak solution of the nitrate of silver, in the proportion of two grains to the ounce of water, was also used as a lotion to the excoriated nymphæ. At the expiration of three weeks, there was no appearance of the disease, and the patient's general health was soon restored.

CHAP. III.

LEUCORRHŒA IN CHILDREN—IN PREGNANT WOMEN—
AND AT THE “TURN OF LIFE.”

No period of life exempts the female from mucous or purulent discharges from the vagina. In infants, from the vascular construction of the labia and vagina, they are very apt to occur, when, if great cleanliness is not observed, an adhesion of the labia may be the consequence. A purulent discharge sometimes arises from the mucous membrane of the vagina, in consequence of dentition, that membrane sympathizing with the irritable state of the gums; and at about the fourth or fifth year, it often takes place from a neglect of cleanliness, or exposure to cold, occasioning sometimes great distress to the little patient. A considerable degree of pain in voiding the urine, inflammation and excoriations about the pudendum, the former extending, in severe cases, half way

down the thighs, are the common results of the morbid vaginal discharge in children. This cannot be too generally known among parents, in whom a degree of unnecessary alarm often arises respecting the origin of the complaint.

In females arrived at that period of life when menstruation may be expected to take place, if a scrophulous diathesis prevails, indicated by the usual constitutional peculiarities, the uterus is often prevented, by the presence of leucorrhœa, from taking on its healthy function.

In the treatment of vaginal discharges in children, the strictest cleanliness ought to be observed, as the secretions so soon become acrid. The parts should therefore be washed carefully with a little tepid vinegar and water, (or if this wash should occasion pain, milk and water may be substituted,) and wiped perfectly dry, at least twice a day. It often happens in young children, as well as in females arrived at the age of puberty, that there is a preternatural fulness in the system, indicated by head-ache, thirst, and a quick hard pulse; in which case, active purging, or blood-letting,

should be premised, to diminish arterial action, before the nitrate of silver, or other local remedies are employed. It is only necessary to add, that the uterus seldom takes on its regular and healthy function, until the leucorrhœa be removed: an object which, in most instances, may be accomplished, by attention to the rules laid down in another part of this work.

When a morbid vaginal discharge appears during the period of pregnancy, it scarcely need be said, that the remedy herein mentioned, should be used with a nice degree of caution and discrimination; indeed, in the majority of cases, it will scarcely be necessary, as the disease commonly assumes a mild character.

It was remarked by Dr. DENMAN, that women who suffer much from this complaint during the period of utero-gestation, have easy labours. In one case, certainly the severest I ever saw, the child was expelled very suddenly, almost, in fact, without any premonitory symptom. I am not prepared to say that this invariably happens.

Among women in whom the menses have been profuse, and whose systems are not peculiarly irritable, no change which takes place, in consequence of impregnation, is more common, than increased activity in the circulation, when that condition of the system is produced, termed plethora, the uterus, and its dependencies, as a natural consequence, partaking of it. It is well known, that where a plethoric condition exists during pregnancy, particularly in the early months, abortion is not only often threatened, but frequently occurs. We might go so far as to say, that almost invariably, during the first period of pregnancy, there are obvious proofs of a local plethora, or determination, most usually indicated by increased heat in, and sensibility of, the cervix uteri. It is, therefore, to be presumed, that the leucorrhœal evacuation acts as a depletion on the internal organs, and that it ought not to be arrested until the congestive state of the uterine system be removed.

In the treatment of leucorrhœal discharge, when it occurs during pregnancy, we should be governed by the state of the system, and the

severity of the local symptoms. With respect to the latter, the complaint is usually accompanied by a sense of heat or burning, and sometimes with itching in the parts to an intolerable degree. If there should be an accelerated and full pulse, a flushed face, and great irritability of the nervous system, blood should be abstracted from the arm, to the amount of sixteen or eighteen ounces, without delay, and the bowels should be freely evacuated. Some degree of caution, however, is requisite in the exhibition of purgatives to a pregnant woman, more particularly if her nervous system is easily excited, or when a disposition to abortion exists. Those purgatives which produce the least irritation about the rectum should be chosen, such as castor oil, or magnesia. Cleanliness, which, in all cases of leucorrhœa, ought most strictly to be observed, is particularly requisite during pregnancy. The vagina should be washed out twice or three times a day, by the injection of warm milk and water, or a weak solution of fine soap in water, and a lotion, consisting of a scruple of the superacetate

of lead in eight ounces of rose-water, may be advantageously employed.

As soon as the labour actually commences, the injections of milk and water should be constantly used, as it should be borne in mind, that the infant, in its passage through the vagina, sometimes imbibes the leucorrhœal matter into its eyes, and becomes exposed to the disease termed purulent ophthalmia. The heat and pruritus about the pudendum, may generally be relieved by the application of from fifteen to twenty leeches to the groins, or the external labia. Ablutions with cold water, is a practice usually had recourse to by females, under all the diversified circumstances of vaginal discharge. One part of tepid vinegar and two of water, will be found a more pleasant, and certainly a more efficient, wash. Even in these cases, after the antiphlogistic plan of treatment has been pursued for a little time, the nitrate of silver would be quite admissible, although the mode of its application should be modified, according to the peculiar circumstances of the case.

Profuse leucorrhœal discharge, occurring at

that period of life when the uterus is about to cease the performance of its natural functions, must always be regarded with suspicion of structural disease. It is well known, that many important changes take place in the constitution of the female, when she arrives at about her forty-fifth year; some hitherto latent disease now shewing itself, its progress is sometimes extremely rapid. The premonitory indications of the "turn of life," commonly depend upon general or local fulness, whilst great cerebral and nervous disturbance, with languor, and a disordered state of the functions of the stomach, often assail the woman at the final cessation of menstruation; indeed, the latter organ sometimes sympathizes to so great a degree with the uterus, as would lead to a belief that some organic disease had taken place in the pylorus. Spasmodic pains in or about the uterus, with a variety of anomalous sensations in the abdomen, are oftentimes experienced; and the woman not unfrequently imagines them to arise from the presence of a fœtus within the uterine cavity. The menstrual secretion often flows, just before this period,

much more copiously than usual, and is very irregular in its appearance. In the intervals, leucorrhœa will almost invariably be present; indeed, at any period of life, when the catamenia have been profuse, I have generally observed abundant leucorrhœa. In some instances, however, the uterus ceases to perform the menstrual function in a very silent and gradual manner, the catamenial fluid diminishing at each succeeding period, until at last it ceases altogether, and the system undergoes no perceptible change; and, now and then, if a woman has been previously languid and nervous, she soon acquires additional strength and vigour.

In order to secure a woman, at this period of life, against the approach of disease, or to arrest it in its progress, a well regulated diet, and regular exercise, are absolutely necessary; but it often happens, from the tendency which there is to obesity, at the final cessation of menstruation, that the woman becomes much indisposed to exercise. If the venous system, at this time appears overcharged; if there is pain in the head, or vertigo, with a full, tense

pulse, bleeding will be required. I have usually found, when there has been a preternatural sensibility of the nervous system, with head-ache, or hysterical symptoms, that the loss of a few ounces of blood is attended by the most beneficial results. Active purgation should be employed in the first instance, and then daily evacuations from the bowels should be procured, by the exhibition of aperients which act readily, but not harshly. The patient should take regular exercise in the open air, and retire to bed at an early hour, sleeping on a mattress. Tea, and other fluids, should be taken very sparingly, if not avoided altogether.

When a menorrhagic state of the system exists, which at this period of life is not unfrequent, it must be remedied before a cessation of the leucorrhœal discharge can be anticipated. Here we find, among non-professional persons, a prevailing opinion of a very injurious tendency, namely, that all such cases depend upon relaxation and debility; and hence the indiscriminate use of wine, and the various preparations of bark and steel. I believe menorrhagia,

or profuse menstruation, most commonly to arise from local activity, or congestion, although, by the disease being protracted, great debility often ensues; indeed, it is not, in general, until the whole system becomes relaxed, the muscles having lost their firmness, or until the patient is alarmed by great functional disturbance, that the practitioner is consulted.

As, at this period of life, organic disease is commonly found to exist in some portion of the uterine system, it is important that the practitioner should ascertain, in all cases of morbid discharge, by the usual examination per vaginam, whether any change of structure really has commenced, in order that an appropriate mode of treatment may be adopted; for it rarely happens, that leucorrhœal discharges continue after the final cessation of menstruation, without some organic lesion, either of the uterus, or other important part.

A watery discharge is sometimes observed to issue from the vagina at this time, which, if not removed, may lead to structural disease.

CHAP. IV.

COLOUR AND CONSISTENCE OF VAGINAL DISCHARGES.
—PRURITUS.

Too much reliance ought not to be placed on the consistence and colour of the vaginal discharge, as indicative of the morbid action existing in any particular structure. A serious disease may have infested the uterus for a long period, without producing a corresponding change in the colour or consistence of the evacuated fluid. It has been observed, by Dr. CLARKE, that a scirrhus tumour may have existed for years, attended only by an increased secretion of simple mucus; and occasionally we find women habitually liable to morbid vaginal secretions, whilst the structural character of all the internal organs remains unaltered. Again, the secretion often assumes a muco-purulent appearance, when it becomes extremely difficult to decide upon its true

character. Notwithstanding the observations which have been made upon this subject by many authors, it must be obvious to every practitioner, well experienced in the diseases of females, that all classifications of the discharges, such as would enable us to decide, either upon the precise nature of the morbid action, or the tissue diseased, are perfectly untenable.

It has been said before, that some authors have divided the idiopathic form of the disease into several stages: a very unobjectionable arrangement, inasmuch as the vaginal discharge varies materially, in many cases, according to the severity, or protracted state of the complaint, each stage requiring some difference of management. In the early stage of leucorrhœa, under ordinary circumstances, the discharge is bland, transparent, and of a whitish colour, being neither acrid, nor accompanied by any degree of local irritation. As the disease advances, and is attended with local pains, heat about the parts, an irritable bladder, &c., the discharge, from being transparent, becomes opaque, frequently assuming a yellowish white, or purulent appearance, sometimes accumu-

lating in the vagina, and pouring out very copiously when the patient gets into the erect posture in the mornings, or upon any unusual effort having been made, as in sneezing or coughing.

It is now, when the various sympathetic affections become sensibly felt, that the secretion from the vagina will be found acrid, and sometimes very offensive, producing, unless cleanliness is strictly attended to, excoriations, or even ulcerations, in some of the external organs. This is a state of the disease which, occurring in a married woman, may prove exceedingly unpleasant in its consequences to the husband, if intercourse be continued. I was requested to see a gentleman, who supposed himself labouring under gonorrhœa, which he insisted must have been contracted from the seat of a privy. There were excoriations about the corona glandis, attended by a white secretion. After a minute inquiry into all the circumstances, the case was discovered to be of leucorrhœal origin, his lady having, at the time, an acrid vaginal discharge.

In some severe cases of leucorrhœa, blood

will be seen mixed with the vaginal secretion, the whole wearing a dirty sanguineous appearance, or being of a greenish hue. If the usual examination be now made, and the disease is not dependant on disorganization, the cervix uteri will be found tender to the touch, and, probably a little tumefied. This condition of the patient often exists, without a morbid alteration of structure, either in the womb, or its appendages.

A case is related in Good's Study of Medicine, of a lady who had a vaginal discharge, which consisted of, at least, from a quarter to half a pint daily, and which was "thick, slimy, brownish, and highly offensive;" but who eventually recovered her usual health.

Here I would again advert to the fallacy of a diagnosis, founded on the appearance of the leucorrhœal fluid, or even, in many cases, upon the state of the cervix uteri itself. How often do we find the latter turgid, enlarged, and resisting, the various healthy functions of the womb, temporarily interrupted only, being resumed, the female becoming pregnant, and perfectly restored to health?

There is one symptom, the effect, in most instances, of the acrimonious quality of the discharge, which is oftentimes excessively harassing, namely pruritus, or itching of the parts; and it is one which demands the attention of the practitioner, inasmuch as it not unfrequently indicates disease of the organs within, as of the uterus, bladder, &c. It appears to arise from the lodgement of the irritating secretion in the vulva, or vagina. I am of opinion, that pruritus rarely comes on, without there being an acrid vaginal secretion, or an efflorescence upon the internal surface of the parts, although it may be so trifling as to escape the observation of the patient herself. A lady who had laboured under incessant pruritus, with a slight leucorrhœal discharge, for a period of four months, was completely restored, by injections of the solution of the nitrate of silver. Dr. DEWEES, by whom the aphthous efflorescence above alluded to was first brought to the notice of the profession, recommends, in strong terms, for the cure, a solution of borax in water, both as a wash and as an injection. An injection of the liq. ammoniæ puræ, in the proportion of a

tea-spoonful to a pint of water, has been found useful; but I would place the greatest reliance upon injections of the solution of the nitrate of silver. Blood-letting, local or general, together with a low vegetable diet, will be essentially necessary to the cure of the complaint, although I have seen more than one obstinate case yield, in the course of a few days, to the injection last named, without any other aid.

Pregnant women sometimes suffer greatly from pruritus, when a modification in the treatment of the complaint becomes requisite, as recommended in another part of this work.

In aged persons, pruritus arises from a different cause, namely, a deficiency in the mucous secretion, naturally required to lubricate the parts. There is one variety of the complaint yet to be noticed, namely, where the cervix uteri is the seat of the disease. This has been described by CHAMBON, but I believe it to be of rare occurrence.

CHAP. V.

PREDISPOSING AND EXCITING CAUSES OF LEUCORRHOEA.—INFLUENCE OF THE SEASONS.—OF A CONTAMINATED ATMOSPHERE. — EPIDEMIC. — HEREDITARY.—METASTASIS.—ASCARIDES.—LEUCORRHOEA OF HABIT.

THE predisposing and exciting causes of leucorrhœal discharges, are exceedingly various; among the most prominent may be mentioned, a scrophulous diathesis, or an irritable and nervous habit of body; a deranged state of the menstrual function; frequent child-bearings, or abortions; protracted lactation, &c. Suckling appears to have great influence over morbid vaginal discharges. I have known several instances, in which a copious leucorrhœal evacuation has immediately ceased, upon the removal of the child from the breast. In a female, whose system is delicate, or what is termed nervous, an exposure to damp or cold air will frequently bring on leucorrhœa; and it is often observed to occur in those whose habits

of life are sedentary, or who indulge in luxurious idleness, living on a diet and drinks of a highly stimulating kind.

It has been asserted, that leucorrhœal complaints are influenced by the seasons. “*Certaines femmes (says CAPURON) sont inondées de fleurs blanches pendant l’hiver, et en sont exemptes dès que l’été arrive.*” Dr. LEAKE has also observed, that he has attended more patients, labouring under fluor albus, in the autumn, than at any other season of the year, especially when the weather has been uncommonly moist and cold; whilst other writers have never observed this influence, and are disposed to believe it accidental when it occurs. The result of my own experience, is in accordance with the opinions of the former author, namely, that the disease prevails more in the autumn than at any other time; but this I would attribute to the great variation of temperature at that season. It is unquestionable that moisture and cold predispose to the complaint, hence it is that females who inhabit low and marshy situations, suffer from it.

In cities and large towns, where women are

exposed to the contaminated atmosphere of crowded streets and houses, particularly if personal cleanliness be not observed, leucorrhœa is often a prevailing disease. Probably there is no circumstance of an ordinary kind, which tends to deteriorate the general health, more than the constant breathing of an impure atmosphere; and it is on this account, that women who enjoy the pure air of the country are not so obnoxious to the complaint, as those who live in crowded and ill ventilated houses in the metropolis. This, I am aware, may be denied by those who maintain, that as the ærial basis of the atmosphere is always the same, it can exert no pernicious influence over the human frame; but, without entering into a philosophical discussion upon the subject, it is sufficient to adduce one simple fact, which ought at once to subvert such an opinion, namely, the effects produced by an impure atmosphere on vegetation. A plant reared in the open, and usually considered healthy, parts of London, soon becomes pale, imbecile, and unfruitful. Such are the analogous effects, in a minor degree, upon the human system.

Leucorrhœa has been noticed as having prevailed as an epidemic. MORGAGNI alludes to its occurrence in Italy, in the spring of 1710, and in Paris, in the autumn of 1765.

It has also been said, that vaginal discharges are hereditary, but of this we have not sufficient proof. One instance is recorded, which would seem to favour the opinions of GARDIEN, and other writers. Two sisters were patients in the Hospice de Perfectionnement, in Paris, in the year 1828, who were both afflicted with leucorrhœa, and great uterine disturbance. In one case, subsequently, the neck of the uterus was removed: upon inquiry, it appeared that their mother, and grandmother, both died of some malignant disease of the womb.

It is a curious physiological fact, that profuse vaginal discharge is sometimes produced by sudden excitement in the system, as, for instance, after great emotions of the mind; and it is not very uncommon for females, not habitually liable to the complaint, to be attacked with it, when labouring under any inflammatory disease, such as fever; whilst, in other instances, upon the invasion of an acute dis-

ease, the leucorrhœal discharge often disappears.

GARDIEN, a French author, enumerates three species, or varieties, of leucorrhœa:—1st, leucorrhœa from irritation; 2nd, constitutional, or adynamic; 3rd, metastatic leucorrhœa. A metastasis of this disease, as is not unfrequently observed in cases of gonorrhœa, particularly in athritic or rheumatic constitutions, is occasionally met with. Notes of the following case were taken, at the time of its occurrence.

CASE IV.—Mrs. B., ætat 37, the mother of four children, had habitually suffered from excessive leucorrhœal discharges. I was requested to visit her, on Monday, the 24th of August last, when I found that for several days previously, she had been labouring under intense burning pain about the pudendum, with considerable pruritus, and an irritable state of the bladder. The vaginal discharge had appeared in the usual manner, at the commencement of her illness, but had now ceased abruptly. An inflammatory fever supervened, with a swelling and acute pain in the right

knee. Eighteen ounces of blood were abstracted from the arm; the bowels were freely purged, and the vinum colchici, in a draught of camphorated mixture, was exhibited at bed time. On the following day, the pain and swelling attacked the other knee, but with less severity; the feverish symptoms were somewhat abated, and there was less heat and irritation about the vagina. An aperient was again administered, and the draught at night as before. All the symptoms gradually disappeared, and in about a week from the first attack, the white vaginal discharge again returned, but in diminished quantity.

Leucorrhœa occasionally appears as a consequence of suppressed discharges, as after suddenly interrupted catamenia, habitual diarrhœa, or the draining from setons, blisters, &c.; whilst, on the other hand, a discharge from another part of the body, not unfrequently supplants the vaginal evacuation. I have known more than one case of habitual leucorrhœa to cease, immediately upon the accession of diarrhœa. An interesting case is related, in the *Dictionnaire des Sciences Medicales*, of a lady who had

been affected many years with a constant vaginal discharge, which disappeared during the winter and spring, to make way for a tetter-like eruption, which covered nearly the whole surface of the body. If a female, accustomed to leucorrhœa, be attacked with small-pox, the vaginal discharge almost invariably ceases during the continuance of the eruptive disease.

One not unfrequent exciting cause of vaginal discharge, is coition, more particularly when it takes place too soon after parturition, before the irritability of the uterus and vagina has completely subsided; but, in truth, the predisposing and local exciting causes are so numerous and diversified, that we might go on enumerating them *ad infinitum*.

MERCATUS, and other writers, have adverted to an irritating cause, which requires a few additional remarks: the presence of ascarides in the lower part of the alimentary canal. Two years since, I was requested to visit a lady residing a short distance from London, who was supposed to labour under disease of the uterus or bladder. The symptoms present were, the discharge of a thick tenacious mucus from the vagina, which

was occasionally mixed with the urine, and very abundant. There was pruritus, or itching, to a distressing degree, and the bladder was in a highly irritable state. Upon inquiry, it was found that ascarides had been seen on the surface of the motions. I therefore did not hesitate in deciding upon the nature of the case. Eight grains of the powder of scammony, with five grains of the submuriate of mercury, and ten of ginger, were prescribed, the dose to be repeated in four days. An almost incredible number of small thread worms were in consequence evacuated, and in about a fortnight, the symptoms before enumerated wholly disappeared. Like ascarides, an accumulation of fæces in the rectum, or hæmorrhoids, may produce so much irritation in the neck of the uterus and vagina, as to occasion profuse leucorrhœa.

Leucorrhœa in the female, like gleet in the male, may sometimes be kept up by habit, after the irritating cause has been removed. This, however, may be considered as the sequel to the stage of inflammation, or excitement, and produces, by its long continuance, great local relaxation and debility, whilst the leucor-

rhœal fluid lodging in the vagina, tends to encourage the irritation of the part. Mr. HUNTER has remarked, that “ a gleet seems to take its rise from a habit of action, which the parts have contracted, and as they have no disposition to lay aside this action, it is, of course, continued.”

Thus we find a species of vaginal discharge, which may be termed the leucorrhœa of habit; a state which, I conceive, may almost invariably be remedied by the use of the nitrate of silver, although the cure may be somewhat protracted.

CHAP. VI.

TREATMENT OF LEUCORRHOEA.

ALTHOUGH, in the removal of such complaints as are now under consideration, I place the most perfect reliance in the nitrate of silver, I am anxious, at the same time, to impress on the mind of the reader, the necessity, in all cases, of adopting what may be termed general principles. Nothing can be more empirical, than to hold up a particular remedy as a specific, or to say that any one article of the materia medica, shall exert its curative influence upon the structure or function of an organ, under all the diversified circumstances of morbid action. I consider the efficacy of any remedy, in the cure of disease, to depend upon its judicious employment in reference to general treatment.

In the investigation and treatment of leucorrhœa, it would seem to be the duty of the practitioner to direct his attention to the state of the circulation and general health, for upon

the existing condition of the system, must depend, very materially, the adoption of means likely to effect a removal of the local disease. If a female labours under vaginal discharge, with a full pulse, a determination to the cerebral vessels, thirst, a coated tongue, and other symptoms of excitement, or fever, the abstraction of blood from the arm, with active purgation and a vegetable diet, would, in all probability, remove the complaint, without the employment of particular remedies. When, therefore, a high degree of vascular action is present, particularly if accompanied by giddiness, or cerebral disturbance, the loss of from twelve to sixteen ounces of blood will be necessary; indeed, it would be highly injudicious to employ any local remedy, until the plethoric symptoms be removed. It is, however, a fact, established by experience, that although general blood-letting will, as a matter of course, diminish arterial action, it seldom affords relief to the patient under the ordinary circumstances of vaginal discharge; whilst the local abstraction of blood, by the application of cupping glasses to the loins, or leeches to

the groins, scarcely ever fail of mitigating the local heat and pains, if it does not remove them altogether. The local pains are usually the first symptoms to which the attention of the practitioner is called by the patient. These, as it has been before remarked, are of the lancinating or shooting kind, passing through the lower region of the uterus, extending commonly into the thighs, with a dull kind of pain, or dragging sensation, in the loins, or about the inferior portion of the sacrum. With regard to the propriety of local bleedings, it may be said, that all the symptoms here enumerated, may arise from irritation, a state which is supposed to exist independently of inflammation, and, therefore, that even local depletion cannot be necessary to the cure. It must not be concealed, that a correct diagnosis between an irritable and a low inflammatory state of the cervix uteri, is sometimes difficult; we must therefore be satisfied, in some cases, with the results of a particular practice. Local bleeding, in most instances, will relieve the immediate sufferings of the patient, a strong reason for its employment, the preferable mode

of drawing blood being, by cupping over the inferior region of the loins; but I have seen cases, where even the loss of a few ounces of blood, has appeared rather to increase, than to diminish the severity of the local pains. I am of opinion that, if the constitution has suffered materially, from a long continuance of the disease, the blood removed, (if, indeed, bleeding be admissible) ought not to exceed four or six ounces. With a view of relieving the utero-vaginal pains, to procure rest, and to allay the irritability of the system, it will be necessary to administer occasional narcotics. It is a common practice to employ opium, in one of its various forms, even at the onset of the disease; but as opium tends to produce constipation, and often produces disturbance about the head, it is better to commence with the hyoscyamus conium, &c., and not to have recourse to opiates, unless these medicines fail of affording relief. When, however, such medicines as will alleviate pain are administered, and the same observation applies to purgatives, they will produce a more decided effect after the loss of blood, than before it,

In all leucorrhœal or uterine affections, whether of the acute or chronic kind, absolute rest of the body is indispensable. The patient should remain, during the greater part of the day, in the horizontal position, either on a mattress or sofa; but it must be observed, that, when there is a great disturbance in the nervous system, a moderate degree of passive exercise, such as riding in a carriage, will prove highly beneficial in its tranquillization, and in restoring the functions and general health.

In weak and languid females, whose systems may be considered in a state predisposed to local congestions, or inflammation, every thing which will tend to augment the nervous power, promote a healthy circulation, and assist in the various secretions, ought strictly to be attended to, as far as the circumstances of the individual will admit. A pure elastic atmosphere, in a dry and elevated situation, will assist materially in giving vigour to the system, whilst sudden atmospheric changes, or an exposure to damp and cold, should be most carefully avoided. Flannel being a non-conductor of external heat, should be worn next to the

skin, for as it keeps up the temperature of the body, it promotes a healthy action in the various secreting organs. A woman liable to vaginal discharges, should at once abolish the practice of wearing silk or cotton stockings, as where a predisposition exists to irritation or inflammation in the uterine organs, the disease may even be excited by coldness of the legs and feet; the balance, therefore, in the circulation should be kept up, by means of thick angola, or lamb's-wool stockings.

From the sympathy which exists between the uterine system and the stomach, the functions of digestion soon become imperfectly performed, and, consequently, a great variety of anomalous symptoms will arise, which are not unfrequently mistaken for causes; and the patient, often from a false delicacy, on her part, or a superficial inquiry, on that of the practitioner, is treated for a disease of the digestive apparatus, and is, perhaps, loaded with blue pill and tonics, which necessarily produce incalculable mischief.

The most common of these sympathetic affections are, a sinking at the pit of the stomach,

nausea or heart-burn, flatulence, abdominal pains, loss of appetite, with a fulness or distention of the stomach, occasional palpitations, head-ach, drowsiness, and often great depression of spirits, the pulse sometimes becoming irregular, if not intermittent. The general treatment of the patient now becomes so obvious, as scarcely to require any very extended remarks. A rigid system of dietetics will be necessary. She should eat sparingly of solid animal food, a small quantity once a day will be amply sufficient, particularly if the stomach is irritable. Rich pastry, and all kinds of confectionary, are very unfit for a weakened stomach, the diet, therefore, should consist principally of sago, arrow root, fresh eggs, new milk, whey, &c. Wines and spirits, as they hurry the circulation, and produce a temporary excitement only, should be prohibited.

Almost the first step necessary in the cure of leucorrhœal disease, is a free evacuation of the alimentary canal; and we should be governed in the choice of aperients, by the peculiar features of the case. If the object be to reduce

the system to its natural standard, or, in other words, to subdue vascular activity, those of the active kind must be preferred. On the contrary, when the digestive functions are impaired, medicines should be mild in their operation, particularly as females, who are already enervated, and who are possessed of a susceptible nervous system, cannot bear powerful evacuants. A moderate dose of rhubarb, with a few grains of calomel, will generally produce efficient discharges from the bowels. The formula below will be found exceedingly useful,* when the stomach is irritable. It is scarcely necessary to remark, that costiveness ought to be avoided as much as possible, as an accumulation of fæces in the lower part of the alimentary canal, will not fail to determine to the uterine vessels, whilst the passage of the hardened fæces through the rectum, would add

- * R. Potass. Carbon. ʒij.
Magnes. Sulph. ʒvj.
Tinct. Sennæ, ʒss.
Syr. Zingiberis, ʒss.

Aq. Menthæ, ʒv. M. ft. Mist. sumantur
cochlearia duo ampla mane quotidie, cum cochleare
magno Succu Limonis in actu effervescentiæ.

to the inflammation, or irritation, already existing in the cervix uteri; indeed, where the vaginal discharge seems to be kept up by general excitement, copious serous evacuations from the bowels will assist materially in the cure.

There is one part of the general remedial means to be noticed, which, I am convinced, is important, although it may not appear so to the reader, I allude to local ablution. Almost all females labouring under leucorrhœal discharges, have recourse to cold water, not only in observance of cleanliness, but also from a belief, that the application of cold gives tone and strength to the parts. Now, although the circumstances which gave origin to this universal custom, are of themselves extremely reasonable and praiseworthy, yet it appears to be very nearly, if not totally, a useless practice. If, however, one part of vinegar be added to two parts of water, and the whole made lukewarm, it will be found a useful and an agreeable auxiliary.

Cold, general bathing is a popular remedy, where a loss of tone in the system appears to

have given rise to disease; but in such cases as are now under consideration, when the female is much enfeebled by the discharge, where great fatigue is induced by slight exertion, where she breathes with difficulty, the cold bath, if not a hazardous remedy, should be used with caution, particularly if the secretions of the digestive organs, have become obstructed. In cases of acute inflammation of the cervix uteri, the hip bath, heated to the temperature of from 90° to 95°, will in general afford considerable relief. It is almost needless to add, that local irritation should be studiously avoided, and that, if the patient is a married woman, an abstinence from sexual intercourse must be rigidly observed.

Many eminent writers* have spoken, in no unmeasured terms, of cantharides, in the cure of leucorrhœa and gleet; a medicine, I presume, suggested to them from its well known effects upon the urinary organs. The beneficial effects of this medicine, when leucorrhœal disorders have been unusually protracted, and have become habitual, are, it cannot be

* HOFFMAN, ROBERTSON, DEWEES, &c.

denied, occasionally very decisive; whilst it must be admitted, that, notwithstanding a train of symptoms of a very distressing nature may be produced by its exhibition, it sometimes exerts no control over the disease in question. Within the last six months, I have seen two cases, in which strangury had been induced, without any good result.

Mercury has been given in leucorrhœal affections, by HEISTER and others, to the extent of salivation; and Mr. HUNTER suggested, with a view of changing its action in its own field, mercurial inunctions in the vagina. In protracted cases, when the draining of the system has produced great languor and debility, mercury, if given to any extent, will be found to increase the general disturbance of the nervous system.*

Most practitioners, I believe, will be candid enough to allow, that the various astringents locally employed, such as a decoction of oak

* “ Various medicines have been proposed, with a view of acting specifically on the secreting parts, such as cicuta, balm of gilead, diuretic salts, calomel, resins, cantharides, electricity, arnica, &c.; but they have very little good effect, and sometimes do harm.”—BURNS.

bark, a solution of the acetate of lead, alum, sulphate of zinc, sulphate of copper, &c. are extremely uncertain in their effects. Dr. BLUNDELL, in his valuable lectures, has observed that, under ordinary management, leucorrhœa is found to be an intractable disease, and that women may go on using astringents for nine months together, and at the end of that time, they may be in the same condition as when they first began.*

CAPURON has recommended, when the disease has not yielded to the use of lotions and injections, or if, from its long continuance as a drain in the system, it might be injudicious to stop it, the determining the fluids from the uterine system by counter irritants, as by a blister applied to the perineum, or to the inside of the thighs. Dr. GOOCH, in his treatment of the irritable uterus, suggests the application of a small blister, about the size of a watch, to the upper part of the sacrum; allowed to heal; then renewed; and so on for many successive

* "It must be admitted that this complaint is in many instances most obstinate, and that, if neglected on its first appearance, it may baffle the skill of the ablest physician."—HAMILTON.

blisters; or a caustic issue to be made, the size of a dollar, dressed with savine ointment, and slightly touched with lunar caustic twice a week. In very irritable constitutions, the remedy would prove worse than the disease.

There is one medicine which hitherto has been employed upon a very limited scale in leucorrhœal diseases, but which, I have every reason to believe, is peculiarly adapted to assist in their removal. I allude to Iodine. The efficacy of Iodine over the absorbent system is now so completely established, as scarcely to require further comment, indeed it may be stated, without fear of contradiction, that we have no article in the materia medica, possessing more influence over, or so capable of producing such extraordinary and important changes in the glandular parts of the body, as this medicine. Its effects upon the uterine system in particular, in almost all the cases in which I have employed it, have been marked and decisive.

I may here notice a case of diseased ovary, in which this little, but important, organ had morbidly increased to the size of the fœtal

head. The general and visceral disturbance occasioned by its presence in the pelvic cavity, had become so distressing, that the patient, notwithstanding the fatality of an operation had been represented to her, often expressed an earnest desire to have it removed. After various means had been employed, without any beneficial result, she was put upon a course of Iodine, commencing with ten drops of the tincture three times a day, gradually increasing the dose to thirty-five. She has been under the influence of this medicine about ten weeks, and at the present time, the tumour is scarcely to be felt. She has suffered nothing from such large doses of the medicine, but, on the contrary, her spirits are greatly improved, and she anticipates, with great confidence, a perfect restoration to health. Dr. THOMSON, the able professor of materia medica at the London University, has related a case of ovarian dropsy, in which, after the woman had been tapped in the usual manner, and seven quarts of albuminous serum, mixed with pus, removed, Iodine was administered, and carried to the extent of thirty-six drops of the tincture three times a

day. The result was, that the tumour wholly disappeared, and the woman was perfectly restored.

Dr. COINDET* has said, that the Iodine acts in a particular manner on the uterine system in deficient menstruation.

In the Transactions of the Association of the Fellows and Licentiates of the King and Queen's College of Physicians in Ireland, there is a paper by Dr. THETFORD, in which he describes the complete success which attended the use of Iodine, in an indurated enlargement of the uterus. The os uteri projected nearly to the labia, the uterus itself having become of osseous hardness, and so large as nearly to fill the pelvic cavity. Mercurial alteratives had been tried without success. The tincture of Iodine was then administered, beginning with seven drops three times a day, in a wine-glass of water, the dose being gradually increased to ten. Progressive absorption of the diseased substance of the uterus rapidly took place, and the catamenia were regularly restored. The Iodine had

* On the use of Iodine in the Clinico-Medical Institute of the Royal University of Padua.

been continued six weeks. It can scarcely be necessary for me to remark, as the subject has been so often alluded to by others, that the effects of Iodine upon the system should be carefully watched, inasmuch as when the constitution of the patient is delicate or irritable, or where an idiosyncrasy exists, its exhibition, even in small doses, is occasionally followed by symptoms of a peculiarly distressing kind, such as palpitation of the heart, and other nervous feelings, vertigo, sickness, &c. when, at least, a temporary cessation of the medicine will become necessary.

I have thus endeavoured to give a brief outline of the treatment, commonly had recourse to in the various species of leucorrhœal complaints, and I have adverted to what may be considered general principles, the observance of which becomes essential, if the remedy now to be spoken of more fully, is to prove efficacious.

In the application of the nitrate of silver to the surface of parts, in a morbid or unhealthy state, a most obvious change is almost imme-

diately produced, which (although we are incapable of explaining it philosophically) eventually terminates in healthy action. One circumstance, more particularly, led me to adopt the use of the nitrate of silver in the cure of these diseases, namely, the extensive and healthy changes which I have known to result, from the application of this agent to the different mucous tissues, when their secreting surfaces had taken on a disordered or unhealthy action, as in those of the fauces and larynx. After extensive trials and observation, I can confidently say, that its effects are as conspicuous in cases of vaginal discharge, not dependent on disorganized structure, as in the various local diseases in which it has hitherto been employed, with so much success. It has been said, that checking the vaginal discharge is prejudicial: this opinion is at variance with my own experience; but I would employ the nitrate of silver, not merely with a view of arresting the discharge, but to produce a perfectly new action, or new excitement, in the part from which the secretion has its origin.

The mode I have adopted in the application of this agent, has been either to conceal it in a silver tube, as it is employed in cases of stricture, (except that the tube should be adapted to the size of the argent. nitrat.) or in the form of solution, in the proportion generally of three grains to the ounce of distilled water, the strength being gradually increased. A piece of soft lint may be moistened with the solution, and introduced, for a short period, into the vagina several times in the day; or a bit of sponge, firmly and neatly tied to the end of a slip of whalebone, may be passed into the vagina, up to the os and cervix uteri, well saturated with the solution. This can easily be effected by the patient herself. It is necessary that the application should be frequently repeated, or no permanent benefit can be expected. Should it become requisite to employ a strong solution, and to apply it to a certain part, or ulcerated surface, it can be accomplished with a degree of nicety, by means of a camel's hair brush, introduced through the speculum, or dilator. This, however, can only be done in the absence of excoriations, or tenderness, as

the introduction even of a common syringe, sometimes produces a considerable degree of pain and irritation; independently of which, some females will not submit to the introduction of any instrument. In married women, there is not the least difficulty in using the dilator, neither does its introduction, under common circumstances, occasion any degree of pain. By means of this instrument, the condition of the cervix uteri and vagina can be readily ascertained.

A few remarks upon the use and choice of the syringe, when injections are employed, will not, I trust, be considered a digression. It must be obvious, that if the act of throwing in the injection be attended by any muscular effort, the injected fluid cannot reach its destined point, namely, the neck of the womb, and upper part of the vagina. In using the common straight syringe, a degree of bodily exertion cannot be avoided, whatever may be the position of the patient, and consequently the operation must prove very inefficient, if not altogether useless. The pipe of the syringe ought to be curved, so that when introduced

its point may come in immediate apposition to the os uteri, and the patient should place herself in the recumbent posture, in which position she should remain at least several minutes after the syringe has been withdrawn. The principal advantage in injecting the fluid is, that if any superficial ulcerations exist, they will be readily healed.

It is very satisfactory to observe, that the nitrate of silver, when judiciously used in either of the forms above recommended, gives no pain nor irritation, at least no more than is occasionally produced by the injection of any common astringent.

The following cases will serve as a further illustration of the mode of practice successfully adopted.

CASE V.—Sept. 17th. J. R., twenty-four years of age, is suckling her first child, now seven months old. She has had a copious and incessant leucorrhœal discharge, with some degree of bearing down, during the last four months. The bowels are regular, and the functions of the stomach are not much dis-

turbed. She complains of a violent pain, which attacks her in paroxysms, in the lower region of the abdomen, and in the pudendum, and there is a constant dull kind of pain about the neighbourhood of the coccyx. The cervix uteri is somewhat enlarged, and pressure with the finger gives pain.

Ten ounces of blood to be drawn from the loins by cupping, and the following powder to be taken early in the morning.

R. Pulv. Jalapæ, gr. xxv.
Potass. Supertart. ℥ij.
Pulv. Aromat. gr. iv. M. ft. Pulvis.

19th. The following injection to be used three times in the day.

R. Argent. Nitrat. gr. xxiv.
Aq. Distill. ℥viij. M. ft. Injectio.

24th. The vaginal discharge is very nearly arrested, but she complains of great languor, and sinking at the pit of the stomach, with loss of appetite.

R. Infus. Gent. Comp. ℥j.
Ammon. Subcarbon. gr. v.
Spt. Lavand. 3ss. M. ft. Haustus
omni mane sumendus vel urgente languore.

Oct. 10th. States that she has been a long journey into the country, and that the vaginal discharge has re-appeared, with occasional severe pain in the region of the uterus.

Twelve leeches to be applied to the groins. The strength of the injection to be increased, (four grains of the nitrate of silver to the ounce of distilled water.)

Rep^r. Pulvis.

15th. There is very little discharge.

Five grains of the nitrate of silver to the ounce of water, as an injection, to be used three times a day.

Dec. 8th. The injection occasioned some degree of pain at first, but she has used it regularly as directed.

The leucorrhœal discharge has ceased entirely.

Rep^r. Haust. Amar.

CASE VI.—A poor woman, residing in Gardener's Row, Westminster, about 40 years of age, having several times aborted, had been subject to excessive vaginal discharge for eighteen months, with shooting pains through

the pelvic region, and about the coccyx, and itching of the pudendum. The digestive function was greatly disturbed, and the system exhibited evident proofs of a highly disordered state of the general health. She had taken for a long period different preparations of bark, steel, &c., and had used various injections, with little or no benefit. Blood had also been abstracted locally, by means of leeches. Upon making an examination per vaginam, the cervix uteri was found in an irritable and painful state, the margin of the os uteri being free from induration.

June 12th. The sponge, as before recommended, was introduced, being well saturated with the solution of the nitrate of silver, in the proportion of three grains to the ounce.

16th. Applied as before.

19th. The leucorrhœal discharge is thinner, and less in quantity. The patient was directed to introduce the sponge daily in the same manner.

30th. Has regularly complied with the directions given, and says she is quite well.

August 2d. Has had no return of the vagi-

nal discharge, and her appearance is much improved. As a matter of course, attention has been paid to the state of the bowels, and the general health.

CASE VII.—Mrs. L., a married woman, the mother of three children, applied to me on the 24th of May, 1829, having a leucorrhœal discharge, of a yellowish colour, with severe pelvic pains, shooting occasionally into the groins. She stated that a tumour was to be felt on the right side of the abdomen, but I could not detect it with the hand. The bowels were constipated, and the bladder irritable. Pulse accelerated, and a great tendency to pyrexia, with a determination to the cerebral vessels. Menstruation occurred about once in three weeks. Upon making the usual examination, the cervix uteri was found neither enlarged nor particularly sensible.

May 24th. Twelve ounces of blood to be taken from the inferior part of the loins by cupping.

R. Infus. Sennæ, ʒj.
 Magnes. Sulphat. ʒss.
 Tinct. Jalapæ ʒj.
 Syrup. Zingib. ʒij. Fiat haustus primo
 mane sumendus.

28th. Complains of head-ach, but the local pains are somewhat relieved; the draught produced copious discharges from the bowels.

Rep^r. Haust. Aper.

30th. Says she is altogether better, but that the "weakness" continues.

The nitrate of silver applied, by means of the silver tube, to the cervix uteri, and surface of the vagina, in the usual manner.

Sumat. Tinct. Iodini, gtt. x. ter in die ex Aquæ
 Cyatho.

June 25th. The patient has been in the country, and has omitted to take the medicine. The discharge continues much the same, both in consistence and colour.

R. Argent. Nitrat. gr. xxxiv.
 Aq. Distill. ʒviij. M. ft. Injectio.

July 12th. Says she has not used the injection for the last ten days, as it occasioned

some degree of pain; but it would appear that the patient leads a very irregular life.

The leucorrhœa and other symptoms continue.

To take twenty drops of the tincture of Iodine three times a day.

Rep^r. Inject.

20th. The vaginal discharge has considerably diminished, and the local uneasiness is much abated.

Continuentur Remedia.

Haust. Aper. mane.

August 12. There is no discharge at present; notwithstanding the patient has been indulging in a stimulating diet, and drinks.

CASE. VIII.—Nov. 2d, 1829. Mrs. —, residing a few miles from London, has had a morbid vaginal discharge for the last two years, with symptoms of disordered health; which she attributes to mental anxiety, and close attention to business: her husband having kept an inn, in which he failed. She has had no family. Naturally of a florid complexion. She now looks pale; complains of languor, with

occasionally sharp lancinating pains through the region of the womb, and a bearing down when in the erect posture; is restless, and sleeps but little; menstrual secretion very sparing. She has been under constant medical treatment, and has used a variety of injections. The cervix and margin of the os uteri are extremely tender to the touch, but there is neither thickening nor ulceration.

R. Magnes. Sulph. ʒiij.
 Infus. Rosæ, ʒx.
 Syr. Aurant. ʒij. M. ft. Haust. bis in
 septimana sumendus.

R. Ext. Hyoscyam.
 Ext. Papaveris āā gr. v. M. fiant Pilulæ
 duæ, hora somni sumendæ.

R. Argent. Nitrat. gr. xxiv.
 Aq. Distill. ʒviij. M. ft. Injectio.

To use tepid vinegar and water as a wash several times in the day, and to observe the horizontal position as strictly as possible.

The diet to consist principally of milk, gruel, sago, &c.

Nov. 9th. The morbid secretion from the vagina is considerably lessened. The draught

having acted freely on the bowels, has induced a degree of weakness and languor.

The following mixture to be taken in doses of two table-spoonsful every morning.

R Infus. Rosæ, ℥vss.
 Sulph. Quinin. 3ss.
 Syrup. Aurant. 3ss. M. ft. Mist.

Dec. 4. Says she has used the injection with great regularity ; that the discharge, from having been of a yellowish colour, has become thin and transparent ; and that it is seldom present, unless after unusual bodily exertion. The injection occasioned no pain after the first time of its being used.

To continue the injection.

Jan. 6th. A great amendment has taken place ; she is more cheerful ; the cheeks have assumed a better hue ; the appetite is good, and there is no vaginal discharge.

15th. The general health continues to improve, and the leucorrhœa has entirely left her.

CASE IX.—MRS. T., ætat 42, the mother of nine children, applied to me on the 3rd of November last.

Says she has been subject to abundant leucorrhœal discharge during the last nine months. The local pains about the region of the uterus are sometimes very acute, and there is a degree of tenderness on pressing the abdomen. The bladder is very irritable. She complains of occasional and severe head-aches, which attack her in paroxysms of several hours duration. The tongue is furred. Pulse 82. Sleep disturbed. Within the last few days she has had pain in the limbs. Menstruation occurs every fortnight or three weeks.

V. S. e brachio ad 3xii.

R. Infus. Sennæ, 3js.

Magnes. Sulph. 3iij.

Vin. Colchici. m. xl.

Tinct. Jalapæ, 3j.

Potass. Subcarb. ʒj

Syr. Aurant. 3ij. M. ft. Haust mane

sumendus cum cochl. magno Succi Limon. durante effervescentiæ.

6th. The aperient has produced many copious and offensive evacuations.

On making an examination per vaginam, the application of the finger to the cervix uteri gave a great degree of pain, and the os uteri was found considerably relaxed. She complains also of much pain about the lower part of the sacrum.

I applied the nitrate of silver through the speculum to the cervix and margin of the os uteri, for the space of a minute.

Sumat Tinct. Iodini, gtt. xij. bis in die ex Aquæ
Cyatho.

In the same manner the nitrate of silver was applied six times, with an interval of two days between each, and the draught was repeated every third morning.

Dec. 12. The vaginal discharge appears only in a trifling degree, but the patient considers herself quite restored. The local symptoms are entirely removed.

CASE X. Mrs. N. forty-eight years of age, residing in an unhealthy part of the town, has aborted five times, and has never had a living child. Since her marriage to a second hus-

band, seven years since, she has had a constant yellowish discharge from the vagina, which has never ceased, even for a day, with the exception of the time when she laboured under small pox, when it was interrupted for a period of six weeks. Her general health is greatly disturbed, and she complains of a violent pain in the right side, and tenderness over the abdomen, and “a sinking at the pit of the stomach.” Bowels irregular. Her legs and feet are usually cold, and become swollen towards night. The function of menstruation ceased about two years ago.

April 7th, Twenty leeches to be applied about the inferior portion of the sacrum.

R. Ext. Hyoscyam. gr. viij.
Hydr. Submur. gr. ij. M. fiant Pilulæ
duæ h. s. sumendæ.

Mist. Salina cum Magnes. Sulph. every morning.

10th. An injection of the solution of the nitrate of silver to be used in the proportion of three grains to the ounce of distilled water.

14th. The injection has not occasioned pain.
Pergat in usu Mist. Aper.

To continue the injection.

28th. To increase the strength of the injection, (℥ij. ad ʒx. aquæ).

May 9th. The pain in the side is entirely removed, and the discharge has become thin and watery.

Ordered to introduce a bit of sponge well saturated with the injection, three times a day into the vagina.

15th. The instructions have been regularly complied with.

The discharge is arrested.

To continue the injection.

June 2d. The patient is quite restored, having, as she expresses it, "never been in such good health for many years."

GONORRHŒA.

INFLAMMATION of the mucous lining of the vagina, and discharge of a specific character, or that which arises from the application of gonorrhœal matter, is of too much importance to pass over without notice; not that the disease comes exactly within the pale of this work, but because the train of symptoms usually produced from acrid leucorrhœal matter, bears such an analogy to that which has its origin in gonorrhœa, that a discrimination oftentimes becomes exceedingly difficult. There is, however, a still more powerful reason for my introducing the subject in this place, which is, that the remedy I have spoken of, as a valuable one in the treatment of leucorrhœa, is, in almost every instance of gonorrhœa, the most certain in effecting a cure. In alluding to the diagnosis, I would observe that, in a recent attack of gonorrhœa, the sensibility of the lining membrane of the urethra is greatly increased, and the passing of the urine occasions

pain or scalding. This of itself may be considered a diagnostic mark, as it is seldom present in leucorrhœa, unless the discharge possesses a highly acrimonious character. Commonly in gonorrhœa, there will be glandular enlargements in the groins, the labia not unfrequently become swollen, and if their internal mucous surface be closely examined, and a slight degree of pressure applied, the matter may be seen issuing from the mucous follicles of the part; these are circumstances which are usually absent in ordinary vaginal discharges, and even if they should occur they will be gradually developed; whereas in gonorrhœa, they show themselves at once. In this last disease, the matter assumes, from the commencement of the attack, a yellowish or even greenish appearance; the colour, it must be recollected, being dependant on the intensity of the inflammation: whilst in the other disease, it is of a cream-colour or yellowish-white, unless in its last stage, or when it has been unusually severe. Should there be sores or excoriations on the parts, these will have appeared almost at the time when the

gonorrhœal secretion commenced, whereas in leucorrhœa, excoriations and ulcerations only arise from a long continuance of the disease, and when the discharge has been highly acrimonious and irritating, and cleanliness has not been observed. Mauriceau and Mercatus have maintained that the leucorrhœal secretion disappears during the flow of the catamenia, whilst the gonorrhœal discharge continues: on the other hand, Baillou and Astruc assure us, that the leucorrhœal secretion often co-exists with the menses. I conceive this to be a point which cannot easily be decided, as from the colour of the menstrual secretion, that of the leucorrhœal, or gonorrhœal, must necessarily be in a great measure obliterated. I have, however, endeavoured to give a detail of the diagnostic symptoms, whilst at the same time, it may not be unnecessary to remark, that the most experienced practitioners have oftentimes considerable difficulty in discriminating one disease from another.

The severity of the gonorrhœal symptoms often depend upon the condition of the system, the more weak and irritable it is, the more

intense will generally be the sufferings of the patient.

In gonorrhœa in the female, a strict ocular examination is indispensable; indeed it cannot be impressed too strongly on the minds of the junior members of the profession. The natural delicacy of the patient, or the false delicacy of the practitioner, ought at once to succumb to this necessary step in the investigation of the case; several instances having occurred under my own observation, where secondary symptoms had arisen, a sore, in all probability, having escaped the notice of the patient. A melancholy instance of this, happened in the person of a young woman who was enceinte. She had lived many years in the family of a man of rank, by whom she eventually became pregnant. Upon her arrival in this country from the continent, where the family resided, she formed another imprudent connexion, the result of which was that she became infected with gonorrhœa. The usual means were had recourse to, but unfortunately secondary symptoms manifested themselves. Mercury was now administered to the fullest extent it could

be carried in a patient so far advanced in pregnancy, and under all the circumstances of the case, she was considered to be doing exceedingly well; but the anticipated arrival of the gentleman from abroad, and a dread that she might communicate the disease to him, together with the certainty, as she imagined, of its appearance in the child so soon to be brought into the world, caused a degree of mental aberration, and in a paroxysm of despair, she swallowed two ounces of laudanum, which in spite of active and very judicious measures, terminated her existence. Had the presence of a sore been ascertained, or secondary symptoms anticipated, and the system placed under mercurial influence at the commencement, in all probability the syphilitic disease would have been eradicated, and the fatal catastrophe prevented. The treatment of simple gonorrhœa in the female, need not vary but in a slight degree, from that which will be found recommended in the pages of this work for the cure of leucorrhœa in its ordinary form, namely—perfect rest of the body, great cleanliness, active purgation, and the applica-

tion of the nitrate of silver in one of the forms already mentioned.

It would be foreign to the nature of this work, to enter into any discussion regarding the pathology of gonorrhœa, or its identity with syphilis, although I feel it necessary to make a few brief observations upon a subject so exceedingly important, more particularly as the disease, when occurring in the female, is very liable to assume an anomalous character, and consequently to give rise occasionally, to an inappropriate mode of treatment. Gonorrhœa has been considered by some modern writers, to consist of a purulent secretion, which may arise as the consequence of common inflammation, the matter not possessing any specific quality. That a purulent discharge takes place from the urethra of the male, in consequence of leucorrhœa in the female, or indeed, independently of sexual intercourse, cannot any longer be doubted, but it must be admitted that these occurrences are very rare; besides, in cases of specific contagion, the disease almost invariably assumes the same character, which it does not, when having a leucorrhœal origin.

There is one question which I conceive to be of infinite importance, and which is still considered by many to remain undecided. Can gonorrhœa give rise to secondary symptoms? Whether gonorrhœa and syphilis are two diseases widely distinct from each other, or one and the same, I have every reason to believe, from facts and observation, that secondary symptoms, such as papular eruptions, blotches, and sore throat do occasionally appear after the former disease, when it has been unusually severe or protracted, and especially when it has occurred during utero-gestation. A modern writer* has stated his belief that as long as *sound* surfaces remain, to which the matter has been applied, no secondary symptom of a specific character follows, that in fact no poison is formed. It would therefore appear, that in order to the production of secondary symptoms, the mucous surface must be broken, or that there necessarily must exist a gonorrhœal sore or excoriation, in which case the matter would be absorbed into the system.

* Mr. TRAVERS.

Upon this point of the subject I would remark, that I have always been carefully minute in my enquiries into the history of such cases, and that in the majority, I have not succeeded in ascertaining that a sore had been detected at any period of the disease, although the fact of the gonorrhœal complaint had been most readily admitted.

I have so often observed secondary symptoms following gonorrhœa in pregnant women, that I have long since thrown aside all doubt upon the subject, and have for several years invariably had recourse to the alterative action of mercury, as in the exhibition of the Hydr. cum Creta, with a view of suspending the disease, and preventing secondary symptoms from taking place.

CASES OF GONORRHŒA CURED BY THE
NITRATE OF SILVER.

Mrs. M., a respectable woman, applied to me about the middle of October, having a considerable vaginal discharge, with pain in

voiding her urine, and great irritation in the pudendum. Upon investigation, I found the disease to be gonorrhœa, which it appeared, she had contracted from her husband about six weeks previously.

An active purgative draught, was ordered to be taken on the mornings of three successive days, at the expiration of which, to use a solution of the nitrate of silver, in the proportion of three grains to the ounce of distilled water; to observe the rules usually laid down with regard to diet and drinks, and to call again in a few days.

Nov. 9th. As I had not seen the patient since the injection had been prescribed, and being desirous of ascertaining its effects, I called upon her at her residence. She stated, that after having taken the purgative medicine, and used the injection for the space of three days, the vaginal discharge had ceased, and indeed, that she was then "quite well."

Dec. 9th. A. R., a poor woman, twenty-five years of age, states, that she has been infected with gonorrhœa about three weeks.

The vaginal secretion is highly acrid, and there is a glandular enlargement in the right groin. The lining membrane of the urethra is particularly sensible, and she complains of great soreness in the pudendum. Bowels confined.

R. Infus. Sennæ, ℥vss.
Pulv. Jalapæ. ʒi.
Potass. Supertart. ʒij.
Syrup. Zingib. ʒss. M. ft. Mist. sumat
partem quartam pro dosi.

To take diluents plentifully, and to abstain from all stimulating food and drinks.

11th.

R. Argent. Nitrat. gr. xxiv.
Aq. Distill. ʒviij. M. ft. Injectio ter
in die utend.

Hydrarg. cum Creta, gr. v. bis quotidie.

14th. The symptoms are relieved, except the pain which is felt when the patient voids her urine.

Continuentur Remedia.

17th. The vaginal discharge has disappeared, but the local irritation continues.

To increase the strength of the injection,
(nitrate of silver, gr. iv. ad $\mathfrak{z}\text{j}$ Aquæ).

Capiat Mist. Purg. ut antea.

23rd. In every respect much better. There is no vaginal secretion, and she voids her urine without pain.

To continue the injection.

26th. There is still a hardness in the groin, but, with this exception, the complaint is entirely removed.

These cases, which I have selected from others, merely from their having been almost the first of the kind of which I had taken notes, illustrate two practically important points; first, that the nitrate of silver will prove a therapeutical agent of great value in the cure of gonorrhœa in the female; and secondly, that it may be employed with perfect safety and advantage, notwithstanding the presence of inflammatory symptoms.

THE END.

